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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

NADER ASGHARI-KAMRANI

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Centralized Identification and Authentication System
and Method

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application
Number(s)

Country

Foreign Filing Date
(MM/DD/YYYY)Priority
Not ClaimedCertified Copy Attached?
YES NO☐☐☐☐☐☐☐☐☐☐☐☐☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☒ Correspondence address belowName **NADER ASGHARI-KAMRANI**Address **6558 PALISADES DRIVE**City **CENTREVILLE**State **VA**ZIP **20121**Country **U.S.A**Telephone **(703)222-5104**

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name (first and middle [if any]) **NADER**Family Name or Surname **ASGHARI-KAMRANI**Inventor's Signature Date **08/28/01**Residence: City **CENTREVILLE**State **VA**Country **U.S.A**Citizenship **AUSTRIA**Mailing Address **6558 PALISADES DRIVE**City **CENTREVILLE**State **VA**ZIP **20121**Country **U.S.A**NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name (first and middle [if any]) **KAMRAN**Family Name or Surname **ASGHARI-KAMRANI**Inventor's Signature Date **08/28/01**Residence: City **CENTREVILLE**State **VA**Country **U.S.A**Citizenship **Netherlands**Mailing Address **6547 PALISADES DRIVE**City **CENTREVILLE**State **VA**ZIP **20121**Country **U.S.A**☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.